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MEETING MINUTES

Governor's EMS and Trauma Advisory Council (GETAC)

Monday, November 19, 2007, 6:12 p.m. – 9:48 p.m.

Call to Order: Chair Edward M. Racht, MD, called the meeting to order at 6:12 p.m. Members present included: Edward M. Racht, MD, Chair; Pete Wolf, EMT-P, Vice Chair; Luis G. Fernandez, MD, FACS; Jodie Harbert III, LP; Vance L. Riley, MPA, LP; Shirley Scholz, RN, CCRN, EMT-P; F.E. Shaheen III, EMT-P; Joan Shook MD; Ronald Stewart, MD; Marti VanRavenswaay; and Tivy L. Whitlock. Members absent: Mike Click, RN; Fredrick N. Hagedorn, MD; and Hector Longoria.

Approval of Minutes: *A motion was made by Vance L. Riley, and seconded by Marti VanRavenswaay, to approve the revised meeting minutes from February 23, 2007. All council members were in favor; the motion passed. A motion was made by Luis G. Fernandez, MD, and seconded by Pete Wolf to approve the meeting minutes from May 25, 2007. All council members were in favor; the motion passed.*

Chair Report: Chair Edward Racht, MD, welcomed everyone to the meeting and thanked them for attending the 2007 EMS Conference in Houston, Texas.

Dr. Racht discussed the postponement of the Governor's EMS and Trauma Advisory Council (GETAC) meetings for August 22-24, 2007 as well as the GETAC retreat that was to be held August 17-19, 2007 due to the events related to Hurricane Dean. The GETAC retreat has been rescheduled for January 25-27, 2008. The goal of the retreat is for the council to look at the structure of the committees, review the responses and comments of the survey that was recently set up for comments from stakeholders, and discuss possible changes for the future structure of these committees.

Dr. Racht also mentioned the committee application process which customarily would begin after November GETAC meetings will be postponed pending the outcome of the GETAC retreat since there is a possibility the structure of the committees will change.

The meeting dates for 2008 for GETAC are: February 6-8, 2008; May 7-9, 2008; August 13-15, 2008; and November 22-24, 2008, in conjunction with the EMS Conference, being held in Fort Worth, Texas. All 2008 meetings, with the exception of the November meeting, will be held at the Austin Hilton Airport hotel.

Department of State Health Services (DSHS) Staff Reports:

Kathryn C. Perkins, assistant commissioner for the Division for Regulatory Services, discussed how the flooding incident at the DSHS Exchange Building may have affected EMS/Trauma Systems stakeholders.

Ms. Perkins also discussed state-wide preparations for Hurricane Dean and thanked everyone who participated in the evacuation. She noted that all providers under the Memorandum of Agreement (MOA) contracts were paid within 30 days.

Further discussion from Ms. Perkins included information about legislative issues related to gurney cars and funding for the state EMS/trauma system through red-light cameras. While funding was not appropriated for the latter, the Health and Human Services Commission (HHSC) expects DSHS to draft rules pertaining to this bill in the event that monies are eventually appropriated.

Ms. Perkins also discussed the hospital licensing rule, one requirement of which is that general hospitals in counties with a population of more than 100,000 people must have emergency physician(s) in the hospital 24 hours a day, seven days a week. In counties with a population of 100,000 people or fewer, a hospital must have on-call emergency physician coverage 24 hours a day, seven days a week. Since its recent implementation, there have been numerous inquiries about this new rule.

Steve Janda, director of the Office of EMS and Trauma Systems Coordination, reported the public license search—the new version of the “cert query”—is now operating on the EMS/Trauma Systems website. Mr. Janda also reported updates on the number of ambulance Memoranda of Agreement (MOA) that DSHS currently has for disaster response situations: 196 ground ambulances and 6 air ambulances. These numbers, along with the names of the providers that have MOA contracts with DSHS, are kept updated on the DSHS EMS/Trauma Systems website. The current MOA contract is being reviewed by DSHS for possible changes; stakeholder input will be solicited for this review as well.

Mr. Janda discussed EMS funding formulas based on all emergency healthcare runs submitted to the Texas EMS/Trauma Registry. Because of intermittent problems with the registry, EMS providers are encouraged to log on to their registry accounts to view their 2006 data. If the information posted is not accurate, providers have the option until December 7, 2007 to submit an affidavit form which can be downloaded from the DSHS EMS/Trauma Systems website.

He concluded his report with an updated breakdown of the 243 Texas hospitals currently holding trauma designation status: Level I – 13; Level II – 9; Level III – 42; and Level IV – 179. Additionally, there are 14 Texas hospitals in active pursuit of designation.

Maxie Bishop, state EMS director, updated the council about the National Registry of EMS passing rate percentages:

	Texas	National
First Responders	80%	78%
EMT-Basic	72%	72%
EMT-Intermediate	73%	68%
EMT-Paramedic	64%	65%

Since Texas moved to computerized testing on January 1, 2007, scores have been improving in all categories with the exception of EMT-paramedic. This may be because there have not been many established programs that help prepare these students for the National Registry exam, Mr. Bishop said. He added that the numbers will be posted on the EMS/Trauma Systems website.

John Villanacci, manager of the Environmental and Injury Epidemiology and Toxicology Branch, started his report with an apology to stakeholders for the ongoing problems and issues the State EMS/Trauma Registry has been experiencing. He reported that a meeting has been set up with the DSHS commissioner to discuss the concerns from the stakeholders and possible long-term strategies to keep this Registry working effectively. He added that a short term solution has been implemented: three new servers have been purchased which are to be used as a production server, test server, and a back-up server, respectively. New, updated software has been purchased as well. Registry staff has been able to identify some external funding sources.

Standing Committee/Task Force Reports:

Air Medical Committee – Chair Shirley Scholz, RN, reported the committee discussed the responses from the U.S. Department of Transportation regarding “Lifeguard” helicopters and access to public or “prior permission required” helipads. The committee had forwarded these inquiries to the Center for Medicaid and Medicare Services (CMS) for an explanation as to how the questions relate to possible Emergency Medical Treatment and Active Labor Act (EMTALA) violations. These responses will be posted on the GETAC website for public view. There has been a designated workgroup assigned to work on an alternative state licensure program. This work group is planning to have a telephone conference some time in the future to come up with a substitute for Commission on Accreditation of Air Medical Services (CAMTS) standards for air ambulance licensing. New language was drafted for the helipad recommendations after discussion to further clarify the intent of the rule. The committee is asking for GETAC to support the regulations for all general hospitals to have a designated area for air medical helicopters access as part of the hospital licensing rules. The committee also asked that the language stricken from the hospital licensing rule at the May 25, 2007, GETAC meeting, be reconsidered and resubmitted into the rule once again with certain changes that will be presented as an action item at GETAC. Lastly, the committee discussed the possibility of the FAA and DSHS conducting joint surveys of air medical providers in Texas.

Education Committee – Chair Jodie Harbert, LP, reported the committee discussed the provider licensing rule 157.11 and the recent addition from legislation, concerning the requirement for all licensed EMS vehicles to carry EpiPens or its equivalent. The instructor certification rule (157.44) was also mentioned in the meeting but there were no recommendations or changes made to it. Issues concerning the National Registry (NR) were mentioned, including ideas and suggestions on how the National Registry (NR) could be more flexible in its skills exams. Discussed were simulations used in lieu of clinicals. More information will be available at the next meeting for this committee. Three members of the Education Committee formed a subcommittee to address ongoing issues within EMS education and are looking into the possibility of developing a survey for: medical directors, providers, educators, and any other personnel. The National Scope of Practice was discussed and reviewed in this meeting and minor changes were suggested. The changes will be presented to the Council for voting. The Education Committee is looking to meet again in January of next year to further discuss issues concerning the EMS curriculum; national accreditation; and the process for formulating mandatory background checks for future EMS applicants.

EMS Committee – Chair Pete Wolf, EMT-P reported the committee discussed the EMS subscription rule (157.XX) and the friendly amendment to remove the verbiage concerning air medical providers as requested at the May GETAC meeting. The committee recognized that there are possible concerns with this rule if this wording is removed and can possibly affect the existing provider licensing rule 157.11. It was decided to make a motion at the GETAC meeting to reinstate the original verbiage into the subscription rule 157.XX. The provider licensing rule 157.11 was discussed at the meeting in regards to the recent legislation concerning the requirement for all licensed EMS vehicles to carry EpiPens or their equivalent. The instructor certification rule 157.44 was mentioned in the meeting but there were no recommendations or changes made to it. Shawn Salter with San Antonio AirLife discussed infectious disease exposures to EMS personnel; and the EMS Committee, along with the Medical Directors Committee, will present the notion of forming a task force specific for these issues and concerns to GETAC.

Injury Prevention Committee – Chair Gary Kesling, PhD, reported that the committee discussed key issues and planning for the next legislative session. The issues and current plans concerning the EMS/Trauma Registry and the committee's efforts to continue supporting the EMS/Trauma Registry were discussed. Potential collaboration on injury prevention activities with the Texas EMS, Trauma and Acute Care Foundation (TETAF) was discussed. The committee also discussed launching a pilot project for a peer review section for the Texas EMS Magazine on prevention and research.

Medical Directors Committee – In the absence of chair Steve Ellerbe, DO, committee member John Griswell, MD, reported that the committee reviewed and unanimously decided to request that GETAC place a formal request to the necessary state government officials that all funds allocated to trauma facilities, EMS providers, and Regional Advisory Councils (RAC) in House Bill (HB) 3588 of the 78th Legislature, and Senate Bill (SB) 1119 of the 80th Legislature be dispersed to the awarded entities as intended.

Also discussed was the topic of infectious disease exposures to EMS personnel. The committee is in favor of developing a standardized system to assist in surveying and treating exposures of infectious diseases in public safety personnel. The Texas EMS/Trauma Registry's inconsistency with regard to data retrieval was also discussed. A recommendation was made to allow a "user-friendly," timely extraction study of this data. The Medical Directors also discussed and unanimously agreed that GETAC should consider taking steps to assisting the Disaster Preparedness Task Force in becoming a standing committee. Other topics discussed were the proposed recommendations of provider licensing rule 157.11 regarding anaphylaxis treatment by Emergency Medical Services (EMS) personnel and ground transportation of stretcher patients as well as the instructor certification rule 157.44 regarding instructor certification with the added proposed change that reporting to the state of poor behavior is to occur "when known."

Pediatric Committee – Chair Joan Shook, MD, reported the committee was presented with the Emergency Medical Services for Children (EMSC) National Resource Center survey results of performance measures that compares Texas rates in comparison to the rest of the nation. Based on the results, the committee concluded that data needs to be reviewed in more detail; more support provided in the distribution of future surveys; information collected should be presented at the Council meetings; a look into forming a "non-responders" focus group to assist in investigating reasons for lack of responses in surveys should be done; and a "frequently asked questions" sheet developed to be placed with future surveys. Other topics discussed included hurricane preparedness and supplies; transportation needs for pediatric patients in the event of an evacuation; the provider licensing rule 157.11 concerning the requirement for all licensed EMS vehicles to carry EpiPens or its equivalent; and the Homeland Security sponsored meeting being held in San Antonio, December 3-7, 2007.

Stroke Committee – In the absence of chair Neal Rutledge, MD, committee member Brent Dalley, CCEMT-P, reported that the committee viewed two presentations. The first presentation was the American Stroke Association Stroke System Overview presented by Dennis Milne, VP, ASA. The second presentation, by Jennifer Smith from the Department of State Health Services (DSHS), concerned the status of the GETAC recommendations on stroke education and training. As a result of this presentation, a subcommittee will review and make possible recommendations for acceptable EMS training programs. The draft rule on stroke center facility designation and transport plans was reviewed and discussed by assistant commissioner Kathy Perkins. Finally, the Regional Advisory Council (RAC) stroke survey letter was presented and reviewed by Mr. Dalley and the committee is anticipating approval of a final draft of the stroke facility proposed rule at the May 2008 GETAC meeting.

Trauma Systems Committee – Chair Ronald Stewart, MD, reported that the committee was in full support of the exception to Level III trauma facility designation criterion process currently being performed by DSHS staff and the committee reaffirmed its support of the Level III orthopedic requirement as it currently exists in rule. The committee also discussed the issues concerning the EMS/Trauma Registry and is ready to present a motion to GETAC about this topic. The committee would like to establish a

work group to develop specific recommendations concerning the Senate Bill (SB) 1119 and will report these recommendations at the next meeting. The committee also discussed the draft DSHS rule 157.132 (Regional Trauma Account) and will continue to work with DSHS staff on its content.

Disaster/Emergency Preparedness Task Force – Co-chair Eric Epley, EMT-P, reported that the Task Force would like to work with DSHS when the agency begins its re-writing process of the Memorandum of Agreement Mutual Aid in Disaster for ground and air ambulances. After the evacuation process that recently occurred during Hurricane Dean, the task force would like to recommend that the roles emergency preparedness groups play in this process should be better defined to ensure the evacuation procedure is effective and completed in a timely fashion.

EMS and Trauma Regulatory Task Force – Co-chair Dudley Wait, EMT-P, gave a PowerPoint presentation at the meeting on the results of the recent survey conducted by this regulatory task force. His presentation was based on results from questions in relation to EMS/Trauma Systems issues and offered a number of specific recommendations to DSHS and GETAC.

Other Reports/Public Comment on Action Items:

DSHS Preparedness Coordination Council – No report was made available.

Traumatic Brain Injury Advisory Council – No report was made available.

DSHS Hospital Licensing Rules Review Workgroup – Jim Parisi reported that the draft hospital licensing rule language regarding hospital helipads was revisited at the Air Medical Committee.

Texas EMS, Trauma, and Acute Care Foundation (TETAF) – Jorie Klein, RN, reported the possible addition of a 7th division—RACs-- in the foundation bylaws. She noted that the EMS Division is focusing on implementation of the Comprehensive Clinical Management Program (CCMP), the Trauma Systems Division is developing site survey processes; the Disaster Division on further defining the roles of Regional Medical Operations Centers (RMOCs), the Education Division on a survey of statewide educational needs; and the Acute Care Division on supporting hospitals seeking to become designated stroke centers.

General Public Comment:

Public comments were heard on a number of issues, including: the lack of stakeholder input and participation in legislature discussion on the epinephrine auto-injector devices bill before it became a rule; concerns about the EMS/Trauma Registry and possible

solutions; and comments about the air medical language taken out of the draft subscriptions rule at the previous GETAC meeting.

Action Items:

A motion was made by Pete Wolf and seconded by Shirley Scholz to request that the council rescind the friendly amendment to exclude air medical providers from the draft subscription plan rule 157.11 made at the May 2007 GETAC meeting and move forward with the original document as written by the combined EMS/Air Medical committees. The motion passed unanimously.

A motion was made by Jodie Harbert and seconded by Luis Fernandez, MD, to adopt rule 157.44 (Instructor Certification) with one minor change in line (W), “failure to notify the department when any current student or certified or licensed program employee is arrested or convicted for any crime” and add the words “when known as described.” The motion passed unanimously.

A motion was made by Pete Wolf and seconded by Jodie Harbert to approve rule 157.11 (Provider Licensing) as presented by staff from DSHS with no changes. The motion passed unanimously.

A motion was made by Shirley Scholz and seconded by Marti VanRavenswaay to add the word “secure” to the Texas hospital licensing rule so as to read: “...or other safe and secure landing area...”; to add language to read “...size and construction to allow a licensed air ambulance in the state of Texas up to medium twin or 14,000 pounds max gross weight, to land safely. For an aircraft greater than 14,000 pounds, such as may be used by the military during disasters, the hospital will have a plan for an alternative landing area, which could be a street or a parking lot that could be secured. Hospital construction in the future will incorporate these requirements into their plan.”; and add language at the end that hospitals granted a waiver to the rule must make that waiver known to the public by generally accepted notification processes. The motion passed unanimously.

A motion was made by Ronald Stewart, MD, to suspend EMS/Trauma Registry submissions by stakeholders starting January 1, 2008, and continuing until such time that the problems associated with the Trauma Registry are corrected to GETAC’s satisfaction. A friendly amendment was made by Luis Fernandez, MD, that a group of internal/external stakeholders work on acceptable resolutions in a reasonable time frame. A second friendly amendment was made by Pete Wolf to suspend Trauma Registry submissions until the next scheduled GETAC meeting set for February 6-8, 2008. A revised motion was then made by Ronald Stewart, MD, and seconded by Luis Fernandez, MD, to suspend EMS/Trauma Registry submission by stakeholders after the February 9, 2008, meeting, if problems with the Trauma Registry are not addressed satisfactorily and to assemble a group of internal/external stakeholders to work on specific issues or resolutions in a reasonable time frame. The motion passed unanimously.

A motion was made by Pete Wolf and seconded by Luis Fernandez, MD, to request GETAC to ask the governor, the speaker of the house and the lieutenant governor that all

funds allocated to trauma facilities, EMS providers, and Regional Advisory Councils in HB 3588 of the 78th Legislature and the SB 1119 of the 80th Legislature actually be appropriated to these entities. The motion passed.

Future meeting dates in 2008: February 6-8, 2008; May 7-9, 2008; August 13-15, 2008; and November 22-24 in Fort Worth, Texas in conjunction with the 2008 EMS Conference.

Adjournment: The meeting was adjourned at 9:48 p.m.